## WHAT IS CLAIMED IS:

distal surface being convex.

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1	1. An	assembly for visualization and access within a body cavity comprising:	
2	a sleeve ha	aving a distal end, a proximal end, and a lumen therebetween;	
3	a scope ha	ving a shaft with a distal end and a proximal end, the shaft being slidably	
4	positionable in the	lumen, a channel extending longitudinally through the shaft, and a lens in	
5	the channel near the distal end,		
6	a transparent bulb disposed at the distal end of the shaft outside of the channel and		
7	optically aligned v	vith the lens.	
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1	2. The	e assembly of claim 1 wherein the transparent bulb is mounted to the distal	
2	end of the shaft.		
1	3. The	e assembly of claim 1 wherein the transparent bulb is mounted to an elongate	
2	sheath having a pr	oximal end, a distal end, and a lumen therebetween, the shaft being	
3	positionable in the	lumen with the distal end of the shaft adjacent to the bulb.	
1	4. The	e assembly of claim 1 wherein the transparent bulb is substantially rigid.	
I	5. The	e assembly of claim 1 wherein the transparent bulb is made of a material	
2	selected from glass	s, acrylic, polystyrene, and polycarbonate.	
		·	
Į.	6. The	e assembly of claim 1 wherein the transparent bulb has a transverse cross-	
2	sectional area large	er than the transverse cross-sectional area of the shaft.	
l	7. The	e assembly of claim 1 wherein the transparent bulb has a distal surface, the	

1	8.	The assembly of claim 1 wherein sleeve has a length sufficient to reach an
2	interior of a p	atient's heart from outside the patient's chest.
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1	9.	The assembly of claim 8 wherein the sleeve has a length of at least about 15 cm.
1	10.	The assembly of claim 1 wherein the transparent bulb comprises an expandable
2	member, the assembly further comprising an inflation lumen in communication with the	
3	expandable member for delivering an inflation fluid thereto.	
1	11.	The assembly of claim 1 wherein the sleeve is substantially rigid.
1	12.	A contact scope for visualization within a body cavity comprising:
2	an elo	ngate sheath having a distal end, a proximal end, a lumen therebetween, and a
3	transparent bulb mounted to the distal end aligned with the lumen; and	
4	a scop	e slidably positionable in the lumen, the scope having a shaft with a distal end, a
5	proximal end	and a channel therebetween, and a lens mounted in the channel near the distal end;
6	where	in the distal end of the shaft may be positioned within the lumen adjacent to the
7	transparent bu	alb to allow viewing through the lens and the bulb.
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1	13.	The contact scope of claim 12 wherein the transparent bulb is substantially rigid.
1	14.	The contact scope of claim 12 wherein the transparent bulb is made of a material
2	selected from	glass, acrylic, polystyrene, and polycarbonate.
1	15.	The contact scope of claim 12 wherein the transparent bulb has a transverse
2	cross-sectiona	al area larger than the transverse cross-sectional area of the shaft.
1	16.	The contact scope of claim 12 wherein the transparent bulb has a distal surface,
2		ace being convex.

1	17. The contact scope of claim 12 wherein the transparent bulb comprises an	
2	expandable member, the sheath further comprising an inflation lumen in communication with	
3	the expandable member for delivering an inflation fluid thereto.	
1	18. The contact scope of claim 12 further comprising a sleeve having an axial	
2	lumen, the sheath being removably positionable in the axial lumen.	
1	19. A repair system for repairing a septal defect in a patient's heart, the repair	
2	system comprising:	
3	a sleeve having a distal end, a proximal end, and a lumen therebetween;	
4	a scope having a shaft with a distal end and a proximal end, the shaft being slidably	
5	positionable in the lumen, a channel extending longitudinally through the shaft, and a lens in	
6	the channel near the distal end,	
7	a transparent bulb disposed at the distal end of the shaft optically aligned with the lens;	
8	and	
9	a septal defect closure device positionable through the lumen of the sleeve.	
1	20. The repair system of claim 19 wherein the septal defect closure device	
2	comprises a delivery shaft having a distal end, a proximal end, and a patch releasably held at	
3	the distal end, the patch having a deployed configuration for positioning across a septal defect	
4	and a collapsed configuration for positioning through the lumen in the sleeve.	
1	21. The repair system of claim 19 wherein the septal defect closure device is	
2	configured to apply a suture to the cardiac septum.	

The repair system of claim 19 wherein the transparent bulb is mounted to the

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distal end of the shaft.

23. The repair system of claim 19 wherein the transparent bulb is mounted to an 1 elongate sheath having a proximal end, a distal end, and a lumen therebetween, the shaft being 2 positionable in the lumen with the distal end of the shaft adjacent to the bulb. 3 The repair system of claim 19 wherein the transparent bulb is substantially rigid. 24. 1 25. The repair system of claim 19 wherein the transparent bulb comprises an 1 expandable member, the assembly further comprising an inflation lumen in communication 2 with the expandable member for delivering an inflation fluid thereto. 3 The repair system of claim 19 wherein the transparent bulb has a transverse 26. 1 cross-sectional area larger than the transverse cross-sectional area of the shaft. 2 The repair system of claim 19 wherein the transparent bulb has a distal surface, 27. 1 the distal surface being convex. 2 The repair system of claim 19 wherein sleeve has a length sufficient to reach an 28. 1 interior of a patient's heart from outside the patient's chest. 2 The repair system of claim 28 wherein the sleeve has a length of at least about 1 29. 2 15 cm. The repair system of claim 19 wherein the sleeve has an outer diameter of less 30. 1 than about 12 mm. 2 The repair system of claim 19 wherein the sleeve is substantially rigid. 1 31.

therebetween, the sleeve being slidably positionable through the access channel into the  33. The repair system of claim 32 wherein the access cannula has a flange of distal end thereof for engaging an interior wall of the heart.  34. The repairs system of claim 32 further comprising an obturator removable positionable in the access channel.  35. The repair system of claim 34 wherein the obturator has a distal end con to penetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve;	1	32. The repair system of claim 19 further comprising an access camina having a	
distal end thereof for engaging an interior wall of the heart.  34. The repairs system of claim 32 further comprising an obturator removable positionable in the access channel.  35. The repair system of claim 34 wherein the obturator has a distal end conto penetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve; positioning a distal end of the visualization scope into the heart through a penetral a wall thereof;  viewing the opening through the visualization scope; sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a distal the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	2	distal end positionable through a wall of the heart, a proximal end, and an access channel	
distal end thereof for engaging an interior wall of the heart.  34. The repairs system of claim 32 further comprising an obturator removable positionable in the access channel.  35. The repair system of claim 34 wherein the obturator has a distal end conto penetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve; positioning a distal end of the visualization scope into the heart through a penetral a wall thereof; viewing the opening through the visualization scope; sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a distate visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	3	therebetween, the sleeve being slidably positionable through the access channel into the heart.	
distal end thereof for engaging an interior wall of the heart.  34. The repairs system of claim 32 further comprising an obturator removable positionable in the access channel.  35. The repair system of claim 34 wherein the obturator has a distal end conto penetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve; positioning a distal end of the visualization scope into the heart through a penetral a wall thereof; viewing the opening through the visualization scope; sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a distate visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;			
1 34. The repairs system of claim 32 further comprising an obturator removable positionable in the access channel.  35. The repair system of claim 34 wherein the obturator has a distal end contopenetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve; positioning a distal end of the visualization scope into the heart through a penetral a wall thereof;  viewing the opening through the visualization scope; sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a distate the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	1	33. The repair system of claim 32 wherein the access cannula has a flange on a	
2 positionable in the access channel.  1 35. The repair system of claim 34 wherein the obturator has a distal end con 2 to penetrate the wall of the heart.  1 36. A method of locating an opening in a patient's heart, comprising: 2 positioning a visualization scope through a sleeve; 3 positioning a distal end of the visualization scope into the heart through a penetr 4 a wall thereof; 5 viewing the opening through the visualization scope; 6 sliding the sleeve into the opening; and 7 removing the visualization scope from the sleeve.  1 37. The method of claim 36 further comprising the steps of: 2 positioning the visualization scope in a sheath outside the heart such that a distar 3 the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and 4 positioning the sheath in the heart through the sleeve;	2	distal end thereof for engaging an interior wall of the heart.	
2 positionable in the access channel.  1 35. The repair system of claim 34 wherein the obturator has a distal end con 2 to penetrate the wall of the heart.  1 36. A method of locating an opening in a patient's heart, comprising: 2 positioning a visualization scope through a sleeve; 3 positioning a distal end of the visualization scope into the heart through a penetr 4 a wall thereof; 5 viewing the opening through the visualization scope; 6 sliding the sleeve into the opening; and 7 removing the visualization scope from the sleeve.  1 37. The method of claim 36 further comprising the steps of: 2 positioning the visualization scope in a sheath outside the heart such that a distar 3 the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and 4 positioning the sheath in the heart through the sleeve;		2.4 The remains question of claim 22 further comprising an objurator removably	
1 35. The repair system of claim 34 wherein the obturator has a distal end con to penetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve; positioning a distal end of the visualization scope into the heart through a penetral a wall thereof;  viewing the opening through the visualization scope; sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a distal the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;			
to penetrate the wall of the heart.  36. A method of locating an opening in a patient's heart, comprising: positioning a visualization scope through a sleeve; positioning a distal end of the visualization scope into the heart through a penetral a wall thereof; viewing the opening through the visualization scope; sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a distal the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	2	positionable in the access channel.	
1 36. A method of locating an opening in a patient's heart, comprising: 2 positioning a visualization scope through a sleeve; 3 positioning a distal end of the visualization scope into the heart through a penetr 4 a wall thereof; 5 viewing the opening through the visualization scope; 6 sliding the sleeve into the opening; and 7 removing the visualization scope from the sleeve. 1 37. The method of claim 36 further comprising the steps of: 2 positioning the visualization scope in a sheath outside the heart such that a dista 3 the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and 4 positioning the sheath in the heart through the sleeve;	1	35. The repair system of claim 34 wherein the obturator has a distal end configured	
positioning a visualization scope through a sleeve;  positioning a distal end of the visualization scope into the heart through a penetr  a wall thereof;  viewing the opening through the visualization scope;  sliding the sleeve into the opening; and  removing the visualization scope from the sleeve.  The method of claim 36 further comprising the steps of:  positioning the visualization scope in a sheath outside the heart such that a dista  the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and  positioning the sheath in the heart through the sleeve;	2	to penetrate the wall of the heart.	
positioning a visualization scope through a sleeve;  positioning a distal end of the visualization scope into the heart through a penetr  a wall thereof;  viewing the opening through the visualization scope;  sliding the sleeve into the opening; and  removing the visualization scope from the sleeve.  The method of claim 36 further comprising the steps of:  positioning the visualization scope in a sheath outside the heart such that a dista  the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and  positioning the sheath in the heart through the sleeve;			
positioning a distal end of the visualization scope into the heart through a penetral a wall thereof;  viewing the opening through the visualization scope;  sliding the sleeve into the opening; and  removing the visualization scope from the sleeve.  The method of claim 36 further comprising the steps of:  positioning the visualization scope in a sheath outside the heart such that a distal the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	1	36. A method of locating an opening in a patient's heart, comprising:	
<ul> <li>a wall thereof;</li> <li>viewing the opening through the visualization scope;</li> <li>sliding the sleeve into the opening; and</li> <li>removing the visualization scope from the sleeve.</li> <li>37. The method of claim 36 further comprising the steps of:</li> <li>positioning the visualization scope in a sheath outside the heart such that a dista</li> <li>the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and</li> <li>positioning the sheath in the heart through the sleeve;</li> </ul>	2	positioning a visualization scope through a sleeve;	
viewing the opening through the visualization scope;  sliding the sleeve into the opening; and  removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of:  positioning the visualization scope in a sheath outside the heart such that a dista  the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and  positioning the sheath in the heart through the sleeve;	3	positioning a distal end of the visualization scope into the heart through a penetration in	
sliding the sleeve into the opening; and removing the visualization scope from the sleeve.  The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a dista the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	4	a wall thereof;	
removing the visualization scope from the sleeve.  37. The method of claim 36 further comprising the steps of: positioning the visualization scope in a sheath outside the heart such that a dista the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	5	viewing the opening through the visualization scope;	
1 37. The method of claim 36 further comprising the steps of: 2 positioning the visualization scope in a sheath outside the heart such that a dista 3 the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and 4 positioning the sheath in the heart through the sleeve;	6	sliding the sleeve into the opening; and	
positioning the visualization scope in a sheath outside the heart such that a dista the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	7	removing the visualization scope from the sleeve.	
positioning the visualization scope in a sheath outside the heart such that a dista the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	1	37. The method of claim 36 further comprising the steps of:	
the visualization scope is adjacent to a transparent bulb on a distal end of the sheath; and positioning the sheath in the heart through the sleeve;	_		
4 positioning the sheath in the heart through the sleeve;		•	
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The method of claim 36 further comprising:

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2	positioning a repair device through the sleeve while the sleeve is positioned through the	
3	opening; and	
4	closing the opening with the repair device.	
1	39. The method of claim 38 wherein the repair device comprises a patch which is	
2	secured across the opening.	
1	40. The method of claim 36 wherein the visualization scope and the sleeve are	
2	positioned through an access cannula extending from outside the chest through the penetration	
3	in the wall of the heart.	
1	41. The method of claim 36 wherein the heart remains beating during each of said	
2	steps.	

The method of claim 36 wherein the opening comprises a septal defect.

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